

# CLETS MISUSE INVESTIGATION REPORTING FORM

Department of Justice  
CLETS Administration Section  
P.O. Box 903387  
Sacramento, CA 94203-3870

Telephone: (916) 227-3677  
FAX: (916) 227-0696

Calendar Year \_\_\_\_\_

*(Submit this form by February 1 of each year for the previous calendar year. Include the number of investigations performed related to CLETS misuse, including any disciplinary action taken.)*

Agency Name \_\_\_\_\_

Address \_\_\_\_\_

Person Completing Form \_\_\_\_\_

Telephone Number \_\_\_\_\_ County \_\_\_\_\_

**1. Total number of investigations performed related to CLETS misuse:**

a. Pending \_\_\_\_\_ + b. Closed \_\_\_\_\_ = Total Performed \_\_\_\_\_  
(1a+1b = 2a +2b+2c)

**2. Of the total number of investigations performed, how many originated from:**

a. Private citizen complaints \_\_\_\_\_  
b. Internal within your Department \_\_\_\_\_  
c. From another agency \_\_\_\_\_

**3. Misuse violations found from investigations (see #4 below):** Total Found \_\_\_\_\_  
(4a+4b+4c+4d)

**4. Total numbers of each type of action taken on misuse violations  
(note only the highest level of action taken in each case):**

a. No action taken: \_\_\_\_\_  
b. Administrative Action:

Counsel \_\_\_\_\_ Reprimand \_\_\_\_\_ Suspension \_\_\_\_\_  
Resignation \_\_\_\_\_ Termination \_\_\_\_\_ Other \_\_\_\_\_

c. Criminal Complaints Filed:

Infraction \_\_\_\_\_ Misdemeanor \_\_\_\_\_ Felony \_\_\_\_\_

d. Number of convictions from criminal complaints filed:

Infraction \_\_\_\_\_ Misdemeanor \_\_\_\_\_ Felony \_\_\_\_\_ Unknown \_\_\_\_\_